

**QM BOLC OFFICER COURSE
DEMOGRAPHIC & INFORMATION SHEET**

CLASS#: _____

NAME (Last, First, MI): _____

RANK: _____ SSN: _____ DOB: _____ GENDER: Male/Female

MARRIED STATUS: M/S AGE: _____

Highest Ranking Family Member Rank/Name: _____

Highest level of Education: _____

Phone #: _____ AKO (email): _____

Local Address (include room #):

Commissioning Source: USMA ROTC OCS DIRECT

Date of Commission: _____ COMPONENT: ACTIVE USAR ARNG

NEXT ASSIGNMENT ADDRESS AND UNIT:

PRIOR SERVICE: YES / NO HIGHEST RANK: _____ MOS: _____

TIME IN GRADE: _____ TIME IN SERVICE: (TOTAL) _____

What component did you complete your prior service? Active / USAR / ARNG

Do you have Previous combat or operations other than was (U.N., Humanitarian Assistance etc.)
experience? YES/NO IF YES: PLEASE LIST:

OIF: _____

OEF: _____

OTHER: _____

Do you have any known allergies? YES / NO If so, please list:

Are you a COLD or HOT weather casualty? (Circle One): Yes/No Cold/Hot

Are there any medical issues that I should be aware of? If YES, please list:

